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ndicated unless corrected naintenance fee notificati		rwise in Block 1, by (a)			and/or (b) indicating a sep		
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YOUNG & TH 745 SOUTH 23R 2ND FLOOR	I ben State addre trans	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
ARLINGTON, V	A 22202	••			(Depositor's name)		
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. •		•				(Date)	
APPLICATION NO.	PLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/522,818 01/31/2005		Karl Lubitz	4001-1197 4863				
FITLE OF INVENTION:	PIEZOACTUATOR A	ND METHOD FOR PRO	DUCTION OF THE PIEZ	OACTUATOR			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DU	E DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/02/2007	
EXAM	INER	ART UNIT	CLASS-SUBCLASS			•	
BUDD, MARK OSBORNE 283		2834	310-328000				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed is recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Siemens Aktiengesellschaft  Munchen, Germany  Please check the appropriate assignee category or categories (will not be printed on the patent):							
	are submitted: No small entity discount # of Copies	permitted)	<ul> <li>b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 25-0120 (enclose an extra copy of this form).</li> </ul>				
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Authorized Signature	/mm		Date November 2, 2007				
Typed or printed name <u>ERIC JENSEN</u> Registration No. <u>37,855</u>							
submitting the complete this form and/or sugges Box 1450, Alexandria, Alexandria, Virginia 22	and the second state of the second se	be USPTO. Time will valurden, should be sent to ONOT SEND FEES OF	ry depending upon the ind the Chief Information Office COMPLETED FORMS	lividual case. Any cer, U.S. Patent as TO THIS ADDRE	comments on the amount of	(and by the USPTO to process uding gathering, preparing, an of time you require to complet Department of Commerce, P.C. mer for Patents, P.O. Box 1450 attract number.	